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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

As the below named inventor(s), I/we declare that:

This declaration is directed to:

The attached application, or  
 Application No. \_\_\_\_\_, filed on \_\_\_\_\_,  
 as amended on \_\_\_\_\_ (if applicable);

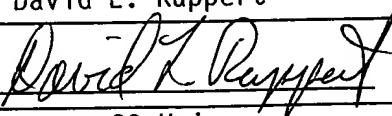
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

## FULL NAME OF INVENTOR(S)

Inventor one: Gavin D. HartiganSignature:  Citizen of: United StatesInventor two: David L. RuppertSignature:  Citizen of: United StatesInventor three: Henry S. HuiSignature:  Citizen of: Hong Kong

Inventor four: \_\_\_\_\_

Signature: \_\_\_\_\_ Citizen of: \_\_\_\_\_

 Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration  
Submitted with Initial  
Filing       Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

|                        |                    |
|------------------------|--------------------|
| Attorney Docket Number | M00A214            |
| First Named Inventor   | Hartigan, Gavin D. |
| COMPLETE IF KNOWN      |                    |
| Application Number     |                    |
| Filing Date            |                    |
| Group Art Unit         |                    |
| Examiner Name          |                    |

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Method and System For Liquefaction Monitoring**

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed   | Certified Copy Attached?   |
|-------------------------------------|---------|----------------------------------|--|--|
|                                     |         |                                  | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> |
|                                     |         |                                  |  |  |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
|                       |                          |  |

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application or PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--|---------------------------------|--------------------------------------|
|  |                                 |                                      |

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number **20411** → Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

| Name | Registration Number | Name | Registration Number |
|------|---------------------|------|---------------------|
|      |                     |      |                     |

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:  Customer Number or Bar Code Label **20411** OR  Correspondence address below

|         |           |     |  |  |  |
|---------|-----------|-----|--|--|--|
| Name    |           |     |  |  |  |
| Address |           |     |  |  |  |
| Address |           |     |  |  |  |
| City    | State     | ZIP |  |  |  |
| Country | Telephone | Fax |  |  |  |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

|  |   |       |                        |         |               |
|--|---|-------|------------------------|---------|---------------|
| Name of Sole or First Inventor:  | <input type="checkbox"/> A petition has been filed for this unsigned inventor       |       |                        |         |               |
| Given Name (first and middle [if any])   |   |       | Family Name or Surname |         |               |
| Gavin D.   |   |       | Hartigan               |         |               |
| Inventor's Signature   |  |       |                        |         |               |
| Residence: City  | Flemington  | State | NJ                     | Country | United States |
| Post Office Address  | 56 Wellington Drive   |       |                        |         |               |
| Post Office Address  |   |       |                        |         |               |
| City   | Flemington  | State | NJ                     | ZIP     | 08822         |
| Country  | United States   |       |                        |         |               |
| <input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto |   |       |                        |         |               |

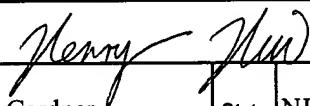
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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

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|  |   |   |    |         |               |             |
|--|---|---|----|---------|---------------|-------------|
| Name of Additional Joint Inventor, if any: |   | <input type="checkbox"/> A petition has been filed for this unsigned inventor |    |         |               |             |
| Given Name (first and middle [if any])     |   | Family Name or Surname  |    |         |               |             |
| David L.                                   |   | Ruppert   |    |         |               |             |
| Inventor's Signature                       |    |   |    |         |               | Date        |
| Residence: City                            | Annandale   | State   | NJ | Country | United States | Citizenship |
| Post Office Address                        | 28 Sand Hill Road   |   |    |         |               |             |
| Post Office Address                        |   |   |    |         |               |             |
| City                                       | Annandale,  | State   | NJ | ZIP     | 08801         | Country     |
| Name of Additional Joint Inventor, if any: |   | <input type="checkbox"/> A petition has been filed for this unsigned inventor |    |         |               |             |
| Given Name (first and middle [if any])     |   | Family Name or Surname  |    |         |               |             |
| Henry S.                                   |   | Hui   |    |         |               |             |
| Inventor's Signature                       |  |   |    |         |               | Date        |
| Residence: City                            | Glen Gardner  | State   | NJ | Country | United States | Citizenship |
| Post Office Address                        | 124-B Main Street   |   |    |         |               |             |
| Post Office Address                        |   |   |    |         |               |             |
| City                                       | Glen Gardner  | State   | NJ | ZIP     | 08826         | Country     |
| Name of Additional Joint Inventor, if any: |   | <input type="checkbox"/> A petition has been filed for this unsigned inventor |    |         |               |             |
| Given Name (first and middle [if any])     |   | Family Name or Surname  |    |         |               |             |
| Inventor's Signature                       |   |   |    |         |               | Date        |
| Residence: City                            |   | State   |    | Country |               | Citizenship |
| Post Office Address                        |   |   |    |         |               |             |
| Post Office Address                        |   |   |    |         |               |             |
| City                                       |   | State   |    | ZIP     |               | Country     |

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